



*The Commonwealth of Massachusetts*  
*Alcoholic Beverages Control Commission*  
239 Causeway Street  
Boston, MA 02114  
[www.mass.gov/abcc](http://www.mass.gov/abcc)

**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 036400013

CITY OR TOWN EASTHAM

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: DELL ENTERPRISES, INC.

DOING BUSINESS AS THE LOBSTER SHANTY

ADDRESS RTE.6 & SALT POND RD

CITY/TOWN: EASTHAM

STATE: MA

ZIP CODE: 02642

MANAGER: DEL GIZZI, DAVID TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

FIRST FLOOR KITCHEN, 3 DINING ROOMS, LOUNGE AND RESTROOMS. SECOND FLOOR LOUNGE, BATHROOM AND OFFICE. CELLAR FOR STORAGE

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY:

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

**We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.**

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

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DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF MARCH (M.G.L. Ch. 138 § 16A)



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**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 036400022

CITY OR TOWN EASTHAM

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: ORLEANS-EASTHAM LODGE OF ELKS #2572

DOING BUSINESS A

ADDRESS 60 MCKOY ROAD

CITY/TOWN: EASTHAM

STATE: MA

ZIP CODE: 02642

MANAGER: BUTILIER,  
ERNEST

TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

OUTDOOR AREA SITUATED WEST OF THE LODGE BLDG. AND PARKING LOT, BORDERED ON THE EAST BY A WALL, SOUTH BY THE BANDSTAND, WEST BY A WOODED AREA AND CONSISTING OF TWO HORSESHOE PITS, OUTDOOR PAVILION SEATS (85) ATTACHED TO BLDG WITH 2 REST ROOMS, SERVICE BAR, 200 SEAT AMP.TH

I hereby certify and swear under penalties of perjury that:

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3. the premises are now open for business (If not explain below)

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Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

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(If disapproved explain)

LOCAL LICENSING AUTHORITY

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**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 036400032

CITY OR TOWN EASTHAM

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: L & T FINE FOODS CORPORATION

DOING BUSINESS AS LAURA & TONY'S KITCHEN

ADDRESS 5950 STATE HIGHWAY

CITY/TOWN: EASTHAM

STATE: MA

ZIP CODE: 02651

MANAGER: FISH-HOOPER,  
LAURA

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

SINGLE LEVEL OF APPROX 2324 SQ FT WITH A HALF BASE- MENT FOR STORAGE. PATIO AREA  
WITH FENCING ON THE NORTH SIDE PATIO AREA ACCESSED BY RESTAURANT ONLY

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
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3. the premises are now open for business (If not explain below)

SIGNED BY:

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

**We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.**

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**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 036400033

CITY OR TOWN EASTHAM

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: JEROPE, INC.

DOING BUSINESS AS ARNOLD'S RESTAURANT

ADDRESS 3580 STATE HIGHWAY

CITY/TOWN: EASTHAM

STATE: MA

ZIP CODE: 02642

MANAGER: NICKERSON,  
NATHAN A. III

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

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Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

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**OFF-PREMISESLICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 036400034

CITY OR TOWN EASTHAM

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: TIDES LANDING LLC

DOING BUSINESS AS TIDES LANDING

ADDRESS 491 CAMPPGROUND ROAD

CITY/TOWN: EASTHAM

STATE: MA

ZIP CODE: 02642

MANAGER: DUBLE, JOHN

TYPE OF LICENSE: Package Store

CATEGORY: Wine and  
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

CONVENIENCE STORE AND DELICATESSEN. FRONT DOOR ENTRANCE AND EXIT

I hereby certify and swear under penalties of perjury that:

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SIGNED BY:

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

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**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 036400036

CITY OR TOWN EASTHAM

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: WOODY'S EASTHAM LOBSTER POOL LLC

DOING BUSINESS AS

ADDRESS 4360-4380 STATE HIGHWAY

CITY/TOWN: EASTHAM

STATE: MA

ZIP CODE: 02642

MANAGER: STEWART,  
WILLIAM R.

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

FIRST FLOOR HAS TWO DINING ROOMS..ONE WITH BAR, THREE TOILETS, KITCHEN, LOBBY..2ND FLOOR STORAGE ATTIC...TWO CELLARS, ONE STORES FOOD, WATER TANK FOR LOBSTER POOL, OTHER FOR BEER STORAGE AND ALCOHOLIC BEVERAGES...OUTDOOR PATIO OFF DINING ROOM TO SOUTH DIRECTION...TOTAL CAPACITY 234

I hereby certify and swear under penalties of perjury that:

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SIGNED BY:

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

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**OFF-PREMISESLICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 036400040

CITY OR TOWN EASTHAM

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: EL MERCADO LOCO INC.

DOING BUSINESS AS SAM'S UNCORKED

ADDRESS 100 BRACKETT ROAD

CITY/TOWN: EASTHAM

STATE: MA

ZIP CODE: 02642

MANAGER: BLAKELY,  
PAMELA

TYPE OF LICENSE: Package Store

CATEGORY: Wine and  
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

**DESCRIPTION OF LICENSED PREMISES:**

WOOD FRAME TWO LEVEL UNIT OF APPROX. 23X19 CONTAINING ON STREET LEVEL A RETAIL SALES AREA AND STAND ALONE REFRIDGE UNITS, WITH A SINGLE ENTRANCE/EXIT FRO THE PUBLIC ON THE NORTH SIDE, A REAR NON-PUBLIC ENTRANCE/EXIT ON THE SOUTH SIDE OF THE BUILDING AND AN INTERIOR DOORWAY ON THE WEST SIDE OF THE UNIT..BASEMENT LEVEL ACCESSED BU INTERIOR STAIRWAY ON THE SOUTH SIDE CONTAINS LOCKED INVENTORY STORAGE AND OFFICE SPACE

I hereby certify and swear under penalties of perjury that:

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SIGNED BY:

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

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**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 036600053

CITY OR TOWN EASTHAMPTON

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: THE EAST VILLAGE INC.

DOING BUSINESS AS

ADDRESS 39 UNION STREET

CITY/TOWN: EASTHAMPTON

STATE: MA

ZIP CODE: 01027

MANAGER: STALLONE,  
DIANA

TYPE OF LICENSE: Restaurant

CATEGORY: Wine and  
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

**DESCRIPTION OF LICENSED PREMISES:**

PREMISES CONSIST OF APPROX. 2000 SQ FT OF GROUND FLOOR COMMERCIAL SPACE..THERE ARE TWO ENTRANCES/EXITS...ONE IS IN THE FRONT OF THE BUILDING FACING UNION STREET, AND THE OTHER GOES TO THE PARKING LOT BEHIND THE BUILDING...THE PREMISES ARE A COMBO GALLERY/LIMITED SERVICE CAFÉ..THE CAFÉ AREA IS IN THE FRONT, FACING UNION STREET...THE LICENSE IS TO INCLUDE OUTSIDE DINING IN THE FRONT AND REAR

I hereby certify and swear under penalties of perjury that:

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DATE:

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EMPLOYER IDENTIFICATION NUMBER:

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By:

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DATE:





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**ON PREMISES LICENSE RENEWAL APPLICATION**

LICENSE NUMBER: 036600061

CITY OR TOWN EASTHAMPTON

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: LYMAN & LYMAN INC.

DOING BUSINESS AS RIFF'S JOINT

ADDRESS 116 PLEASANT STREET

CITY/TOWN: EASTHAMPTON

STATE: MA

ZIP CODE: 01027

MANAGER: CAHILL, JEFFREY TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

CASUAL DINING RESTAURANT WITH 49 SEATS AND COUNTER SERVICE...LOCATED INSIDE OF AN OLD MILL BUILDING...TWO ENTRANCES INTO COMMON AREA OF BUILDING

I hereby certify and swear under penalties of perjury that:

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By:

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